



AFFORDABLE CARE ACT MASSACHUSETTS IMPLEMENTATION UPDATE

October 26, 2011

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These Updates, published by the Executive Office of Health and Human Services (EOHHS) in consultation with the other state agencies involved in ACA implementation, will bring you news related to the implementation of provisions of the ACA here in Massachusetts.

Guidance

10/20/11 CMS announced the **final Medicare Shared Savings Program: Accountable Care Organization (ACO) rule under §3022** of the ACA and a new opportunity for financial support to help doctors, hospitals, and other health care providers work together to improve the care for Medicare patients. Providers who choose to become ACOs will be able to share in savings by better coordinating patient care, providing high quality care, and using health care dollars more wisely. Federal savings from the initiatives could generate up to \$940 million in savings from 2012 through 2015.

Proposed ACO rules were announced in March 2011.

Learn more at: <http://www.hhs.gov/news/press/2011pres/03/20110331a.html>

The **final Medicare Shared Savings Program rule** implements §3022 of the ACA and establishes a voluntary program that provides incentives for participating health care providers who meet certain quality standards based upon patient outcomes and care coordination. Providers who meet the standards can share in any resulting savings. The rule will be published in the Federal Register on November 2, 2011 and is effective January 2, 2012.

Read the rule at: <http://www.healthcare.gov/law/resources/regulations/index.html>

In a complementary program, HHS announced the agency is accepting applications from providers to help test the **Advance Payment model**. The model will test whether paying a portion of future shared savings will increase participation of physician-owned and rural ACOs in the Medicare Shared Savings Program, and whether advance payments will allow teams of providers to improve care for beneficiaries and generate Medicare savings more quickly. The

advanced payments would be recovered from any future shared savings achieved by the ACO. Additional information, including the solicitation, is available on the Innovation website at: <http://innovations.cms.gov/areas-of-focus/seamless-and-coordinated-care-models/advance-payment/>

Concurrently with the publication of the final rule, the following have also been issued:

1) a **joint CMS and OIG notice and solicitation of public comments on potential waivers of certain fraud and abuse laws** in connection with the Medicare Shared Savings Program; This interim final rule with comment period establishes waivers of the application of the Physician Self-Referral Law, the Federal anti-kickback statute, and certain civil monetary penalties (CMP) law provisions to specified arrangements involving accountable care organizations (ACOs) under section 1899 of the Social Security Act (the Act) (the Shared Savings Program), including ACOs participating in the Advance Payment Initiative. Section 1899(f) of the Act, as added by the Affordable Care Act, authorizes the Secretary to waive certain fraud and abuse laws as necessary to carry out the provisions of section 1899 of the Act.

Comments are due 60 days after publication in the Federal Register.
Read the Final Waivers in Connection With the Shared Savings Program interim final rule at: <http://www.healthcare.gov/law/resources/regulations/index.html>

2) a **joint FTC and DOJ proposed antitrust policy statement**; Under the Antitrust Policy Statement, the agencies will give rule of reason treatment to an ACO if they use the same governance and leadership structure and the same clinical and administrative processes in the commercial market as it uses to qualify for and participate in the Shared Savings Program. In addition, the Antitrust Policy Statement outlines an expedited process that ACOs can use to obtain further guidance about their antitrust concerns.

The Antitrust Policy Statement is posted at: www.ftc.gov/opp/aco/ and http://www.justice.gov/atr/public/health_care/aco.html

3) an **IRS notice requesting comments regarding the need for additional tax guidance** for tax-exempt organizations, including tax-exempt hospitals, participating in the Medicare Shared Savings Program.

The Internal Revenue Service (IRS) Fact Sheet, Tax-Exempt Organizations Participating in the Medicare Shared Savings Program through Accountable Care (FS-2001-11), is posted at: <http://www.irs.gov/pub/irs-drop/n-11-20.pdf>.

Read the HHS press release at: <http://www.hhs.gov/news/press/2011pres/10/20111020a.html>
Read the fact sheets on the announcements at: <http://www.HealthCare.gov/news/factsheets/2011/10/accountable-care10202011a.html> and <http://www.cms.gov/ACO/>

CMS will offer an **Accelerated Development Learning Session** to aid organizations interested in becoming Accountable Care Organizations. The free session, scheduled for November 17-18 in Baltimore, will offer providers the opportunity to learn more about this option for providing care.

For more information, visit: <https://acoregister.rti.org/>

Prior guidance can be viewed at: www.healthcare.gov

News

10/25/11 Created under §6301 of the ACA, **the Patient-Centered Outcomes Research Institute, or PCORI, accepted feedback on its working definition of 'Patient-Centered Outcomes Research.'** PCORI is an independent nonprofit tasked with conducting patient-centered outcomes research and the Institute is asking the public to help define that term. PCORI was created to conduct research to provide information about the best available evidence to help patients and their health care providers make more informed decisions. PCORI's research is intended to give patients a better understanding of the prevention, treatment and care options available, and the science that supports those options. Comments were due in September. PCORI collected over 500 comments from various stakeholders and is working with a contractor to provide analysis of the feedback. The PCORI Board will consider a definition of patient-centered outcomes research in January 2012.

For more information, visit: <http://www.pcori.org/provide-input/>.

10/24/11 HHS announced that **500 community health centers have been chosen for the Federally Qualified Health Center Advanced Primary Care Practice Demonstration** under §3021 of the ACA. This demonstration is designed to improve coordination and quality of care by paying community health centers based on the quality of care they deliver. In addition, Medicare will pay a monthly fee for each eligible person that receives primary care services during the three year study. 13 Massachusetts community health centers will participate in this demonstration.

For more information regarding this demonstration, visit:
<http://www.hhs.gov/news/press/2011pres/10/20111024a.html>

Upcoming Events

Money Follows the Person (MFP) Working Group

Wednesday, November 9, 2011 from 10:30 AM - 12 PM
Saxe Conference Room
Worcester Public Library
3 Salem Square
Worcester, MA

Please contact Kate.Russell@state.ma.us if you would like to attend the meetings. Requests for reasonable accommodations should be sent to MFP@state.ma.us. Although an RSVP is not required, it is appreciated. More information on MFP can be found at: [MFP Information](#)

The meeting date and time of the next **Quarterly Patient Protection and Affordable Care Act Stakeholder Implementation Meeting** will be posted on the website at: <http://mass.gov/national health reform> under Quarterly Stakeholder Meetings as soon as it is scheduled.

Bookmark the **Massachusetts National Health Care Reform website** at: <http://www.mass.gov/nationalhealthreform> to read updates on ACA implementation in Massachusetts.

Remember to check <http://mass.gov/masshealth/duals> for information on the **"Integrating Medicare and Medicaid for Dual Eligible Individuals"** initiative.